

PEST CONTROL



THE PESTEX COMPANY

A division of Advance Group, LLC
 P.O. Box 501622 Saipan, MP 96950
 Telefax: (670) 233-4747 • Fax: (670) 233-2629
 E-mail: advance@vzpacifica.net

SERVICE TICKET NO.: **03192**

SERVICE ACKNOWLEDGEMENT REPORT

Name/Company: DYS
 Address: Kagman
 Service Location: SOU

Date: 10-27-05
 Phone No.: _____

TYPE OF SERVICE

- | | | |
|--|--|--|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> IPM (Integrated Pest Management) Method |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap/Time Mist | <input type="checkbox"/> Termite Bait Station |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trenching/Slab Injection/Rodding |
| <input checked="" type="checkbox"/> Residual Spray | <input type="checkbox"/> Lawn Treatment (Residual Spray) | <input type="checkbox"/> Soil Treatment |
| <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Turf & Ornamental | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Flies/Gnats | <input checked="" type="checkbox"/> Carpenter Ants |
| <input type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Ticks | <input type="checkbox"/> Termites |
| <input checked="" type="checkbox"/> Rodents/Shrews | <input checked="" type="checkbox"/> Fleas | <input type="checkbox"/> Others: _____ |

TECHNICIANS NOTE:

COMMENTS:

* Insecticide liquid for the baseboard of hallway, offices, rest-room, kitchen, library room, utility room and all other facility.
 * Refilled Rodent Station with Rodenticide at the exterior of the building.

RECOMMENDATIONS:

MATERIALS USED

Suspend SC
 Dagnat
 Contract Blox

AMOUNT USED

2 oz
 1 oz
 12 pcs.

Customer's Name: Mr. V. V. V.
 Signature: _____

Technician(s): Roger de Guzman
 Time In: 9:00 Time Out: 10:20

"We're ADVANCE!"



THE PESTEX COMPANY

A division of Advance Group, LLC

P.O. Box 501622 Saipan, MP 96950

Telefax: (670) 233-4747 • Fax: (670) 233-2629

E-mail: advance@vzpacifica.net

SERVICE
TICKET NO.: **08474**

SERVICE ACKNOWLEDGEMENT REPORT

Name/Company: DYS
 Address: Kegman
 Service Location: 100 Building

Date: 11-10-05
 Phone No.: _____

TYPE OF SERVICE

- | | | |
|--|--|--|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> IPM (Integrated Pest Management) Method |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap/Time Mist | <input type="checkbox"/> Termite Bait Station |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trenching/Slab Injection/Rodding |
| <input checked="" type="checkbox"/> Residual Spray | <input type="checkbox"/> Lawn Treatment (Residual Spray) | <input type="checkbox"/> Soil Treatment |
| <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Turf & Ornamental | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Flies/Gnats | <input checked="" type="checkbox"/> Carpenter Ants |
| <input checked="" type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Ticks | <input type="checkbox"/> Termites |
| <input type="checkbox"/> Rodents/Shrews | <input checked="" type="checkbox"/> Fleas | <input type="checkbox"/> Others: _____ |

TECHNICIANS NOTE:

COMMENTS:

insecticide liquid to the interior facilities such as hallways, restroom, control room, office, kitchen, lunch room, panel room including unit A building and emergency room facilities.

RECOMMENDATIONS: *Applied ants bait or Talstar Granules to the exterior perimeter of the building.*

MATERIALS USED

AMOUNT USED

<i>Talstar Granules</i>	<i>5 lb</i>
<i>Suspend SC</i>	<i>2 oz</i>

Customer's Name: 100/DYS
 Signature: [Signature]

Technician(s): Roger de Guzman
 Time In: 9:30 Time Out: 10:16

"We're ADVANCE!"

The Pestex Company



"Serving the CNMI Since 1980"

THE PESTEX COMPANY

A division of Advance Group, LLC

P.O. Box 501622 Saipan, MP 96950

Telefax: (670) 233-4747 • Fax: (670) 233-2629

E-mail: advance@vzpacifica.net

SERVICE

02955

TICKET NO.:

SERVICE ACKNOWLEDGEMENT REPORT

Name/Company: DYSDate: 9-22-05Address: Kagman

Phone No.:

Service Location DYS-L10A

TYPE OF SERVICE

- | | | |
|--|--|--|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> IPM (Integrated Pest Management) Method |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap/Time Mist | <input type="checkbox"/> Termite Bait Station |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trenching/Slab Injection/Rodding |
| <input checked="" type="checkbox"/> Residual Spray | <input type="checkbox"/> Lawn Treatment (Residual Spray) | <input type="checkbox"/> Soil Treatment |
| <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Turf & Ornamental | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Flies/Gnats | <input checked="" type="checkbox"/> Carpenter Ants |
| <input checked="" type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Ticks | <input type="checkbox"/> Termites |
| <input checked="" type="checkbox"/> Rodents/Shrews | <input checked="" type="checkbox"/> Fleas | <input type="checkbox"/> Others: _____ |

TECHNICIANS NOTE:

COMMENTS:

*Insecticide liquid to the interior and exterior facilities of the building to control the insects.
 *Refilled rodent station with rodenticide to control also the rats.

RECOMMENDATIONS:

MATERIALS USED

AMOUNT USED

Tempo
 Fastrac

16 ml.
 9 pcs.

Customer's Name: John AmireSignature: [Signature]Technicians(s) Roger de GuzmanTime In: 9:40Time Out: 16:40

"We're ADVANCE!"



THE PESTEX COMPANY

A division of Advance Group, LLC

P.O. Box 501622 Saipan, MP 96950

Telefax: (670) 233-4747 • Fax: (670) 233-2629

E-mail: advance@vzpacifica.net

SERVICE
TICKET NO.: **08157**

SERVICE ACKNOWLEDGEMENT REPORT

Name/Company: DYS
 Address: Kagman
 Service Location: DOA

Date: 10-13-05
 Phone No.: _____

TYPE OF SERVICE

- | | | |
|--|--|--|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> IPM (Integrated Pest Management) Method |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap/Time Mist | <input type="checkbox"/> Termite Bait Station |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trenching/Slab Injection/Rodding |
| <input checked="" type="checkbox"/> Residual Spray | <input type="checkbox"/> Lawn Treatment (Residual Spray) | <input type="checkbox"/> Soil Treatment |
| <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Turf & Ornamental | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Flies/Gnats | <input checked="" type="checkbox"/> Carpenter Ants |
| <input checked="" type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Ticks | <input type="checkbox"/> Termites |
| <input checked="" type="checkbox"/> Rodents/Shrews | <input checked="" type="checkbox"/> Fleas | <input type="checkbox"/> Others: _____ |

TECHNICIANS NOTE:

COMMENTS:

* Inspection liquid to the interior and exterior facilities of the building.
 * Install 2 pcs. of Rodent Station with Rodenticide in front of the building.

RECOMMENDATIONS:

* Refilled old station with Rodenticide to keep on control the rats.

MATERIALS USED

AMOUNT USED

Dreagnet
 Tempo
 Contrae B/ox
 Rodent Station

1 oz
 1/6 ml
 21 pcs
 2 pcs.

Customer's Name: DYE
 Signature: _____

Technicians(s): Roger de Guzman
 Time In: 8:55 Time Out: 10:25

"We're ADVANCE!"



Advance Pest Solutions dba: THE PESTEX COMPANY

TERMITES ■ FUMIGATION ■ GENERAL PEST CONTROL

P.O. Box 501622 Saipan, MP 96950

Telefax: (670) 233-4747

E-mail: aps@vzpacifica.net • pestex@vzpacifica.net



"Serving the CNMI since 1990"

SERVICE ACKNOWLEDGEMENT REPORTSERVICE
TICKET NO.: **001999**

Name/Company: DYS
 Address: Kagman
 Service Location: LPA

Date: 7-29-05
 Phone No.: _____

TYPE OF SERVICE

- | | | |
|--|--|---|
| <input type="checkbox"/> Commercial | <input checked="" type="checkbox"/> Inspection Follow-up | <input type="checkbox"/> Termite Bait Station |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trancing/Slab Injection |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Pre-Construction/Soil Treatment |
| <input checked="" type="checkbox"/> Residual Spray | <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Rodents | <input type="checkbox"/> Termites |
| <input checked="" type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Flies | <input type="checkbox"/> Others: _____ |

COMMENTS / RECOMMENDATION

* Residual spray was did ~~to~~ the hallway baseboard, office, restroom, panet room, kitchen exterior perimeter, Unit A & Unit B and all other facilities of the area.

* Refilled Rodent bait station w/ bait Gloy.

* Put glueboard at Unit B building for Rodents.

MATERIALS USED**AMOUNT USED**

Talsar
 Demon TC
 Contract Bior
 Glueboard

7 02
 1.5 02
 20 pcs
 2 pcs.

Customer's Name: Antjegeth
 Signature: MARCEY 7E1617M

Technicians(s) Roger de Guzman
 Time In: 9:00 Time Out: 11:00

"We're ADVANCE!"



THE PESTEX COMPANY

A division of Advance Group, LLC
P.O. Box 501622 Saipan, MP 96950
Telefax: (670) 233-4747 • Fax: (670) 233-2629
E-mail: advance@vzpacifica.net

advancegroup

SERVICE 03616

SERVICE ACKNOWLEDGEMENT REPORT

TICKET NO.: _____

Name/Company: DGS
Address: Regman
Service Location: ADU

Date: 11-24-05
Phone No.: _____

TYPE OF SERVICE

- | | | |
|--|--|--|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> IPM (Integrated Pest Management) Method |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap/Time Mist | <input type="checkbox"/> Termite Bait Station |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trenching/Slab Injection/Rodding |
| <input checked="" type="checkbox"/> Residual Spray | <input type="checkbox"/> Lawn Treatment (Residual Spray) | <input type="checkbox"/> Soil Treatment |
| <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Turf & Ornamental | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Flies/Gnats | <input checked="" type="checkbox"/> Carpenter Ants |
| <input checked="" type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Ticks | <input type="checkbox"/> Termites |
| <input type="checkbox"/> Rodents/Shrews | <input checked="" type="checkbox"/> Fleas | <input type="checkbox"/> Others: _____ |

TECHNICIANS NOTE:

COMMENTS:

insecticide liquid to the interior and exterior base-board especially to the restroom, front desk, control room, library room, penitentiary, detention rooms, kitchen and all other interior facilities.

RECOMMENDATIONS:

MATERIAL/S USED

AMOUNT USED

Suspend SC
Dreghet

2.02
1.502

Customer's Name: Ally P. (JDI)

Signature: _____

Technicians(s) Roger de Guzman

Time In: 9:00 Time Out: _____

"We're ADVANCE!"



Advance Pest Solutions dba:
THE PESTEX COMPANY
 TERMITES ■ FUMIGATION ■ GENERAL PEST CONTROL

P.O. Box 501622 Saipan, MP 96950
 Telefax: (670) 233-4747
 E-mail: aps@vzpacifica.net • pestex@vzpacifica.net



"Serving the CNMI since 1990"

SERVICE ACKNOWLEDGEMENT REPORT

SERVICE
 TICKET NO.: **001964**

Name/Company: DYS Date: 7-15-05
 Address: Kagman Phone No.: _____
 Service Location: 4DU

TYPE OF SERVICE

- | | | |
|--|--|---|
| <input type="checkbox"/> Commercial | <input checked="" type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> Termite Bait Station |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trancing/Slab Injection |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Pre-Construction/Soil Treatment |
| <input checked="" type="checkbox"/> Residual Spray | <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Rodents | <input type="checkbox"/> Termites |
| <input checked="" type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Flies | <input type="checkbox"/> Others: _____ |

COMMENTS / RECOMMENDATION

- * Residual spray on all interior facilities of 4DU building.
- * Refilled Rodent Station with bait blox.
- * Install 1 Rodent Station with bait blox next to the dumpster.

MATERIALS USED

AMOUNT USED

Talstar	7 oz.
Contrac Blox	20 pcs.
Rodent Bait Station	1 pcs.

Customer's Name: M. Antonette Teigila
 Signature: M. Teigila

Technicians(s) Roger de Guzman
 Time In: 9:50 Time Out: 11:25

"We're ADVANCE!"



THE PESTEX COMPANY

A division of Advance Group, LLC
 P.O. Box 501622 Saipan, MP 96950
 Telefax: (670) 233-4747 • Fax: (670) 233-2629
 E-mail: advance@vzpacifica.net

advancegroup, inc.

SERVICE 03940

SERVICE ACKNOWLEDGEMENT REPORT

TICKET NO.: _____

Name/Company: DYS
 Address: Kagman
 Service Location: LDA

Date: 12-21-05
 Phone No.: _____

TYPE OF SERVICE

- | | | |
|--|--|--|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> IPM (Integrated Pest Management) Method |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap/Time Mist | <input type="checkbox"/> Termite Bait Station |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trenching/Slab Injection/Rodding |
| <input checked="" type="checkbox"/> Residual Spray | <input type="checkbox"/> Lawn Treatment (Residual Spray) | <input type="checkbox"/> Soil Treatment |
| <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Turf & Ornamental | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Flies/Gnats | <input checked="" type="checkbox"/> Carpenter Ants |
| <input checked="" type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Ticks | <input type="checkbox"/> Termites |
| <input type="checkbox"/> Rodents/Shrews | <input checked="" type="checkbox"/> Fleas | <input type="checkbox"/> Others: _____ |

TECHNICIANS NOTE:

COMMENTS:

Insecticide liquid to the baseboard of hallway, office, rest-room, panel room, control room, unit 1 & 2 building facade and exterior baseboard.

RECOMMENDATIONS:

MATERIALS USED

AMOUNT USED

Suspend SC

2 02

Customer's Name: Juvenile Detection

Technician(s): Roger de Guzman

Signature: [Signature]

Time In: 9:00

Time Out: 10:00

"We're ADVANCE!"



ADVANCE PEST SOLUTIONS

TERMITES • FUMIGATION • GENERAL PEST CONTROL

PMB 495 Box 10003, Beach Road, Garapan, Saipan, MP 96950-8903

Telefax: (670) 233-4747 • E-mail: aps@vzpacifica.net

SERVICE
TICKET NO.: **1405**

SERVICE REPORT

Name / Company: DYS-LIU

Date: 6-3-05

Address: Kegman

Phone No.: _____

Service Location _____

TYPE OF SERVICE

- | | | |
|---|---|--|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> Termite Bait Station |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Tranching/Slab Injection |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Pre-Construction/Soil Treatment |
| <input type="checkbox"/> Residual Spray | <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|---|----------------------------------|--|
| <input checked="" type="checkbox"/> Ants | <input type="checkbox"/> Rodents | <input type="checkbox"/> Termites |
| <input checked="" type="checkbox"/> Roaches | <input type="checkbox"/> Flies | <input type="checkbox"/> Others: _____ |

MATERIAL/S USED

AMOUNT USED

Talstar

3 02

Dreagat

6 02

COMMENTS / RECOMMENDATION

Treated perimeter liquid to ff. areas:

* hallway

* office room

* kitchen

* Unit A & B facilities

* library

* Exterior perimeter

Customer's Name: _____

Signature: _____

Nadia Tagabud

Technician(s) _____

Time In: _____

Roger de Guzman

Time Out: _____

"We're ADVANCE!"



THE PESTEX COMPANY

A division of Advance Group, LLC
 P.O. Box 501622 Saipan, MP 96950
 Telefax: (670) 233-4747 • Fax: (670) 233-2629
 E-mail: advance@vzpacifica.net

advancegroup

SERVICE 03907

TICKET NO.: _____

SERVICE ACKNOWLEDGEMENT REPORT

Name/Company: DYS
 Address: Kegman
 Service Location: 400

Date: 12-8-05
 Phone No.: _____

TYPE OF SERVICE

- | | | |
|---|--|--|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Inspection/Follow-up | <input type="checkbox"/> IPM (Integrated Pest Management) Method |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Fly Trap/Time Mist | <input type="checkbox"/> Termite Bait Station |
| <input type="checkbox"/> Fogging/Fumigation | <input type="checkbox"/> Rodent Bait Station | <input type="checkbox"/> Termite Post-Treatment: Wood Injection/Trenching/Slab Injection/Rodding |
| <input type="checkbox"/> Residual Spray | <input type="checkbox"/> Lawn Treatment (Residual Spray) | <input type="checkbox"/> Soil Treatment |
| <input type="checkbox"/> Gelling/Crack & Crevices | <input type="checkbox"/> Turf & Ornamental | <input type="checkbox"/> Others: _____ |

TYPE OF PEST

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Ants | <input checked="" type="checkbox"/> Flies/Gnats | <input checked="" type="checkbox"/> Carpenter Ants |
| <input checked="" type="checkbox"/> Roaches | <input checked="" type="checkbox"/> Ticks | <input type="checkbox"/> Termites |
| <input checked="" type="checkbox"/> Rodents/Shrews | <input checked="" type="checkbox"/> Fleas | <input type="checkbox"/> Others: _____ |

TECHNICIANS NOTE:

COMMENTS:

Sprayed liquid insecticide to the interior and exterior facilities of 400 building.
Refilled Rodent station w/ Rodenticide.

RECOMMENDATIONS:

MATERIALS USED

Dragnet
Enforcer (Rat Max)

AMOUNT USED

2.5 oz
14 pcs.

Customer's Name: _____
 Signature: _____

Technician(s): *Roger de Guzman*
 Time In: *10:40* Time Out: *11:25*

"We're ADVANCE!"